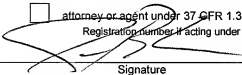


<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2009</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 350292003100	
Application Number	10/593,786	Filed	March 24, 2005
For SUBTYPES OF HUMANIZED ANTIBODY AGAINST INTERLEUKEN-6 RECEPTOR			
Art Unit	1647	Examiner	J. M. Lockard
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee	\$150
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	Small Entity Fee	\$75
<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))		\$245
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))		\$635
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))		\$1,270.00
<input type="checkbox"/>			\$1730
<input type="checkbox"/>			\$2350
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/>	A check in the amount of the fee is enclosed.		
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> .		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the	<input type="checkbox"/> applicant/inventor.		
	<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.		
	Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).		
	<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>45,640</u>		
	<input type="checkbox"/> attorney or agent under 37 CFR 1.34.		
	Registration number if acting under 37 CFR 1.34 <u>                    </u>		
 Signature		September 29, 2011 Date	
Jonathan Bockman Typed or printed name		(703) 760-7769 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/>	Total of <u>1</u> forms are submitted.		